



# **LAKE COUNTY SHERIFF'S OFFICE**

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## **NOTICE TO ALL PROSPECTIVE APPLICANTS TO THE LAKE COUNTY SHERIFF'S OFFICE**

**Please read this notice carefully. It describes our application and hiring process and includes a very detailed list of all the material that we must receive from you in order to consider you a valid applicant.**

Thank you for your interest in becoming an employee of the Lake County Sheriff's Office. Our application process is detailed and time consuming both for the applicant and the Lake County Sheriff's Office. This process involves several phases, and is designed to meet the requirements of State and Federal laws, Lake County Sheriff's Office hiring policies, and particular requirements of the Lake County Sheriff's Office. The application process involves 6 steps and is progressive, whereas failure at any level of the process will result in immediate disqualification.

### **The 6 steps are as follows:**

1. Minimum qualifications - prior to applying, make sure you meet the minimum qualifications.
2. Application Packet - pursuant to the instructions in this packet, submit a complete application packet.
3. Testing - The LCSO will host/conduct this testing prior to the interview phase (typically on the same day). If you have current valid scores for the Police Officer Selection Test (POST) and Montana Physical Agility Test (MPAT) or if you are currently POST certified you will not be required to perform the testing.
4. Oral board interview.
5. One-on-one interview.
6. Conditional Offer of employment or placement on the eligibility list - after successful completion of the previous steps you may be given a conditional offer of employment, or be placed on a six (6) month eligibility list. This will require you to submit additional information to the Sheriff's Office. If an offer of employment is given, it is conditional upon successful completion of an extensive background investigation conducted by LCSO, physical and psychological testing conducted by a psychologist of LCSO's choosing.

### **1. Minimum Qualifications**

Peace Officers in the State of Montana must meet the following minimum qualifications under Title 7-32-303 Montana Code Annotated:

- Be a citizen of the United States;
- Be at least 18 years of age;
- Be fingerprinted and search made of the local, state and national fingerprint files to disclose any criminal record;
- Not have been convicted of a crime for which the person could have been imprisoned in a federal or state penitentiary;
- Be of good moral character, as determined through a background investigation;
- Be a high school graduate or have passed the general education development (GED) test and have been issued an equivalency certificate by the superintendent of public instruction or by an appropriate issuing agency of another state or the federal government;
- Be examined by a licensed physician, who is not the applicant's personal physician, appointed by the employing authority to determine if the applicant is free from any mental or physical condition that might adversely affect performance by the applicant of the duties of a police officer;
- Successfully complete an oral examination conducted by the appointed authority or its designated



# LAKE COUNTY SHERIFF'S OFFICE

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

representative to demonstrate the possession of communication skills, temperament, motivation, and other characteristics necessary to the accomplishment of the duties and functions of a peace officer;

- Possess or be eligible for a valid Montana driver's license.

## **2. Application Packet**

In addition to the minimum qualifications established by Montana law, the Lake County Sheriff's Office has also established a variety of qualifications that the staff of the office has determined to be important factors in selecting our employees. We provide application requirements and materials to facilitate the applicant's packet preparation. Completion of the forms and compilation of the documents you must submit require great attention to detail, not unlike the attention to detail required in this career field. Refer to the Document Checklist to ensure you have gathered and submitted all required documents and supplemental information in order for your application packet to be complete and valid.

**Original signatures are required on all forms. Photocopied and/or faxed signatures are not acceptable.**

In order to assist us in determining your qualifications to be an employee of the Lake County Sheriff's Office, we require the following documents. Please examine your packet closely. If it is incomplete, it will not be considered.

- Standard Application for Position of Peace Officer in the State of Montana signed by the applicant. **Included with application packet.**
- Lake County Sheriff's Office Applicant Letter of Understanding signed by the applicant and witnessed by a certified Notary Public. **Included with application packet.**
- Authorization to Release Information signed by the applicant and witnessed by a certified Notary Public. **Included with the application packet.**
- Disclosure of Court Ordered Child Support signed by the applicant and witnessed by a certified Notary Public. **Included with the application packet.**
- Copy of GED certificate, if applicable. **Provided by the applicant.**
- Documentation of any other factors, which the applicant wishes to have considered.

**REMEMBER, YOU WILL NOT BE CONSIDERED AN APPLICANT, AND WE WILL TAKE NO FURTHER ACTION, UNLESS YOUR APPLICATION INCLUDES ALL OF THE DOCUMENTS NOTED ABOVE.**

Your complete application will be reviewed to determine if you meet the State of Montana and Lake County Sheriff's Office minimum qualifications. If you do, the Lake County Sheriff's Office may offer you the opportunity to test (if applicable) and interview.

## **3. Testing**

The LCSO will accept current scores for the POST written (1 year), and MPAT physical tests (6 months), or a POST certificate to bypass LCSO proctored testing. If you cannot provide the documentation, you will be requested to conduct testing, proctored by the LCSO at a date, time, and location to be determined by LCSO. (This is generally on the same day interviews are conducted.)

## **4. Oral Board Interview**

If selected, you will be interviewed by a board and asked a series of questions. The questions are



# **LAKE COUNTY SHERIFF'S OFFICE**

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

the same for all candidates. The board may consist of members of the Sheriff's Office, county government, and the public. Following the interview cycle, the interview board will make recommendations to the Sheriff of who they designate to be eligible for employment with the Lake County Sheriff's Office.

**VETERAN'S PREFERENCE:** Among those interviewed, the score of the applicants who are veterans of the United States military service will be increased by the percentage required by Montana law at the time of the interview

## **5. One on one interview**

The one on one interview is offered only to the top candidates selected by the oral interview board and conducted by the Sheriff or his designee. Generally, this interview is conducted within 24 hours of the oral board interview, and oftentimes, on the same day. The questions may vary by candidate.

## **6. Conditional offer of employment or placement on eligibility list**

Upon determination of eligibility for employment, you will be requested to immediately provide the following:

- Photocopy of Selective Service Registration card, if applicable.
- Three credit reports dated within 30 days of submission - one credit report from EACH of the three reporting bureaus. Do not submit a "Three in One" or Free Credit Report. You must contact EACH of the three credit reporting agencies and request a complete report.
- Two sets of fingerprints obtained by a law enforcement agency.
- Photocopy of applicant's driver's license.
- Copy of GED certificate, if applicable.
- Military discharge papers (DD Form 214 and SF180), if applicable.
- Copy of citizenship or naturalization papers, if applicable.
- Documentation of any other factors, which the applicant wishes to have considered.

**PLACEMENT ON THE ELIGIBILITY LIST IS NEITHER AN OFFER OF EMPLOYMENT, NOR A PROMISE THAT YOU WILL BE OFFERED EMPLOYMENT IN THE FUTURE.**

**If given a conditional offer of employment, an extensive** background investigation and psychological evaluation, will be performed, in accordance with the procedures established by the Lake County Sheriff's Office. If eligibility for employment is terminated, or if a conditional offer of employment is rescinded, the Lake County Sheriff's Office reserves the right to not inform the candidate as to the reasons why. These procedures may differ from other law enforcement agencies, and we may also interpret the results differently.

With regards to a background investigation, in general, we consider;

- Previous/current employment record
- Driving record
- Criminal history, if any
- Military history, if any
- **Any and all indicators of maturity, stability, sound judgment and good moral character.**



# LAKE COUNTY SHERIFF'S OFFICE

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

**The most important thing to remember with regard to the background investigation is to be honest and complete in all of the information that you provide. Attempting to conceal or distort information, or failure to cooperate completely with the background investigation, will result in immediate disqualification from further consideration.**

The decision to extend an offer of employment is made by the Sheriff. That decision is made based upon the Sheriff's assessment of the qualifications and performance of each candidate as demonstrated during the entire application and screening process, and the Sheriff's judgment as to how each candidate may best meet the needs of the department.

Once more, thank you for your interest in becoming a member of our team. We take great pride in the professionalism of our employees, and in our ability to protect and serve the citizens of Lake County. Joining us in this endeavor is a complex and difficult task. So is being an employee of the Lake County Sheriff's Office



# LAKE COUNTY SHERIFF'S OFFICE

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## **AUTHORIZATION AND CONSENT FOR RELEASE OF PERSONAL INFORMATION**

Date: \_\_\_\_\_

Driver License Number: \_\_\_\_\_

State Issued: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle: \_\_\_\_\_

Maiden name, Alias' and/or Other Last Names Used: \_\_\_\_\_

Current Address: \_\_\_\_\_

City and County: \_\_\_\_\_

State and Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Circle One: Male      Female

This Authorization and Consent for Release of Personal Information acknowledges that Lake County, Montana ("County") and/or its designated agents, may now, or at any time I apply for employment with the County, or am assigned to, volunteer with or am employed by the County, conduct background and other investigations of me whether the records are of a public, private or confidential nature. These investigations might include, but are not limited to, searches of the Montana Criminal Justice Information Network (CJIN); educational institutions attended; financial or credit institutions, including records of loans; records of commercial or retail credit agencies; other financial statements; records of previous employment, including work history, efficiency ratings, complaints and grievances filed by or against me; records and recollections of attorney-at-law or of other counsel, whether representing me or any other person (in either a civil or criminal case in which I have been involved); records from the U.S. Veterans' Administration; criminal history information of file in local, state or federal agencies, including records of my fingerprints; and motor vehicle records, and following an employment offer, workers' compensation reports from relevant Departments of Labor, National Personnel Records Center or a relevant state Industrial Commission or similar agencies. I also authorize the National Personnel Records Center, or other custodian of my military



# LAKE COUNTY SHERIFF'S OFFICE

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

service record, if any, to release the following information and/or copies of documents from my military service record: DD214, service record, and any disciplinary records.

I understand that these searches will be used to determine my work eligibility and/or work assignments under the County's employment or volunteer policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to the authorized representatives of the County. In addition, I release and discharge the County and its agent and associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs expenses or any other charge or complaint filed with any agency arising from retrieving and reporting this information.

I understand that my application for employment with the County will not be processed without my having consented to and by actually signing this consent and release.

The Privacy Act of 1974 (5 United States Code § 552a) requires that Federal, state, or local agencies inform individuals whose social security number is being requested whether such disclosure is mandatory or voluntary, the basis of authority for such solicitation, and the uses which will be made of it. Accordingly, disclosure of your social security number is voluntary; it is being requested pursuant to 28 U.S.C. § 534 for the purposes described above. The social security number will be used as an identification tool; consequently, failure to provide the number may result in reduced ability to make such identifications or provide future identity verifications.

After reading this document, I fully understand its contents and authorize the above background verifications for the purposes stated.

\_\_\_\_\_  
**APPLICANT'S PRINTED NAME**

\_\_\_\_\_  
**APPLICANT'S SIGNATURE**

**DATE:** \_\_\_\_\_

Subscribed and sworn to before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**SEAL**

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Typed or Printed Notary Name

Notary Public for the State of \_\_\_\_\_

Residing at \_\_\_\_\_

My Commission Expires \_\_\_\_\_





# LAKE COUNTY SHERIFF'S OFFICE

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## **CHARACTER REFERENCES**

The following references are not current or previous employers, nor are they family members. These references have known me for at least five years and are able to comment on my character (Three references are required, but you may list more if you so choose):

NAME

ADDRESS

PHONE #

1. \_\_\_\_\_

The above reference knows me through; \_\_\_\_\_

2. \_\_\_\_\_

The above reference knows me through; \_\_\_\_\_

3. \_\_\_\_\_

The above reference knows me through; \_\_\_\_\_

4. \_\_\_\_\_

The above reference knows me through; \_\_\_\_\_

5. \_\_\_\_\_

The above reference knows me through; \_\_\_\_\_



# LAKE COUNTY SHERIFF'S OFFICE

DONALD R. BELL  
SHERIFF / CORONER

BEN WOODS  
UNDERSHERIFF

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## CHILD SUPPORT DISCLOSURE

Please initial the appropriate response. Failure to initial one of the three will result in denial of your application.

\_\_\_\_\_ I am not subject to a court order for the support of a child

\_\_\_\_\_ I am subject to a court order for the support of one or more children and I am in compliance with the order, or I am in compliance with a plan approved by the County Attorney (or other public agency) enforcing the order for the repayment of the amount owed, pursuant to the order.

\_\_\_\_\_ I am subject to a court order for the support of one or more children and I am **NOT** in compliance with the order or plan approved by the County Attorney (or other public agency) enforcing the order for repayment of the amount owed, pursuant to the court order.

Applicant's Social Security Number \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

Subscribed and sworn to before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Typed or Printed Notary Name

Notary Public for the State of \_\_\_\_\_

Residing at \_\_\_\_\_

My Commission Expires \_\_\_\_\_

SEAL





# **LAKE COUNTY SHERIFF'S OFFICE**

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## **LETTER OF UNDERSTANDING**

I am applying for a position with the Lake County Sheriff's Office. I understand that there are certain requirements I must meet before I can be accepted into this position. I also understand that I must submit to, and cooperate fully with, an extensive background investigation, which consists of, but is not necessarily limited to, the following areas of concern:

1. Thorough criminal history check and driver's license record check
2. Thorough examination of my prior employment
3. Examination of my personal credit/financial report
4. Thorough investigation of all those elements deemed necessary by the Lake County Sheriff's Office to determine whether I meet the standards of high moral character required for Lake County Sheriff's Office personnel

I understand that the background investigation will be conducted in accordance with procedures established by the Lake County Sheriff's Office. The Lake County Sheriff's Office will select applicants who meet the Department's minimum selection criteria. If I am not selected to be interviewed, I will not be investigated further.

I understand that if I am interviewed by an interview board, this is neither an offer of employment, nor a guarantee that any such offer is forthcoming. However, if I am designated as a candidate for the position, a more extensive background investigation will be conducted.

The Sheriff is responsible for all decisions regarding which applicants, if any, will receive an offer of employment. Those determinations are based upon the Sheriff's assessment of the needs of the Lake County Sheriff's Office, and the totality of my qualifications as those qualifications are reflected in all phases of the application process.

I acknowledge and accept that if an offer of employment as a Deputy Sheriff is extended to me, the following conditions apply:

1. I must be examined by a licensed physician, who is not the applicant's personal physician, appointed by the employing authority to determine if the applicant is free from any mental or physical condition that might adversely affect performance by the applicant of the duties of a police officer;
2. I must pass a psychological examination conducted by a licensed professional selected and paid for by the Lake County Sheriff's Office.



# LAKE COUNTY SHERIFF'S OFFICE

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

3. I must complete the Montana Physical Agility Test immediately prior to employment to ensure that I can meet the admission standards of the Montana Law Enforcement Academy Basic School.
4. I must successfully complete the Montana Law Enforcement Academy Basic school within one year of employment, unless my failure to do so is the result of scheduling problems beyond my control, or:
  - A. I currently possess a Montana Police Officer Standards and Training Council Basic Certificate, or,
  - B. I possess a current Police Officer Standards and Training Council Basic Certificate from another state. However, in this instance I must successfully complete the Montana Law Enforcement Academy's Legal Equivalency test within twelve months of my employment by the Lake County Sheriff's Office.

All of the aforementioned tests and examinations will be administered in a manner selected by the Lake County Sheriff's Office. I understand that the test results are the property of the Lake County Sheriff's Office, and these results are not available to me unless, in the opinion of the professional conducting the tests, they reveal a health condition that is important to my well-being.

**I understand that all documents, interviews, reports and any other information regarding all phases of the background investigation and selection process are treated as confidential information by the Lake County Sheriff's Office. As such, they will not be shared with anyone not directly involved in the hiring process. The Lake County Sheriff's Office will not share the information with me except in response to a court order.**

I understand that my failure to cooperate fully in all facets of the background investigation will result in my immediate disqualification from further consideration for the position with the Lake County Sheriff's Office.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

Subscribed and sworn to before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**SEAL**

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Typed or Printed Notary Name  
Notary Public for the State of \_\_\_\_\_  
Residing at \_\_\_\_\_  
My Commission Expires \_\_\_\_\_



# LAKE COUNTY SHERIFF'S OFFICE

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## **CERTIFICATION OF PENALTY**

I hereby declare that all statements and information provided by me to the Lake County Sheriff's Office during all phases of my pre-employment background investigation, and in all other pre-employment screening processes are true and complete to the best of my knowledge and belief. I understand that any misstatements of material fact, willful omission of material fact or willful deception will be cause for disqualification and rejection without appeal as a candidate for employment for any position within the Lake County Sheriff's Office. I fully understand that any misstatements, omissions or deceptions made by me that may be discovered after such time as I may be employed by the Lake County Sheriff's Office are grounds for disciplinary action, up to and including termination of employment.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

Subscribed and sworn to before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Signature

**SEAL**

\_\_\_\_\_  
Typed or Printed Notary Name

Notary Public for the State of \_\_\_\_\_

Residing at \_\_\_\_\_

My Commission Expires \_\_\_\_\_



# LAKE COUNTY SHERIFF'S OFFICE

**DONALD R. BELL**  
**SHERIFF / CORONER**

**BEN WOODS**  
**UNDERSHERIFF**

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## **EMPLOYMENT APPLICATION**

Cover Letter

### **Position you are applying for** **(Please check one)**

☐ Deputy Sheriff      ☐ Reserve Deputy Sheriff      ☐ Detention Officer      ☐ Communications Officer

Thank you for your interest in joining one of the most diversified agencies in the United States. Lake County Montana has a vast array of attractions that bring tourists to our county every year. Lake County has over 1600 square miles of land and 159 square miles of inland water area, with an approximate population of 27,000.

These core values guide day-to-day actions and decision making in the Lake County Sheriff's Office

Ethical  
Professional  
Service-Oriented  
Fiscally Responsible  
Organized  
Communicative  
Collaborative  
Progressive

The mission of the Lake County Sheriff's Office is to enhance the quality of life in our county by working in partnership with the community we serve. We strive to promote safety, enforce the laws, and safeguard the constitutional rights of all people.



# LAKE COUNTY SHERIFF'S OFFICE

DONALD R. BELL  
SHERIFF / CORONER

BEN WOODS  
UNDERSHERIFF

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## STANDARD APPLICATION FOR POSITION OF PEACE OFFICER IN THE STATE OF MONTANA

*The information contained on this form is sought in good faith. It will not be used in any way to discriminate against any application for employment in violation of state or federal law.*

### INSTRUCTIONS:

Please complete this application by typing or printing in ink. An application tailored to the position is to your advantage.

Section 12 of this form may be used to continue or explain answers or to provide other information relative to your qualifications or availability.

**LATE, INCOMPLETE, or UNSIGNED applications will NOT be considered.**

This agency is committed to make reasonable accommodation to any known disability that may interfere with an applicant's ability to compete in the selection process or an employee's ability to perform the duties of the job. If you would like us to consider any such accommodation, please notify us at the time of need.

THE VETERANS' EMPLOYMENT PREFERENCE ACT AND THE HANDICAPPED PERSONS' EMPLOYMENT PREFERENCE ACT provide preference in public employment for certain military veterans and handicapped persons or their eligible relatives. Contact your local Vocational Rehabilitation Services Office (Department of Social and Rehabilitation Services) for details on obtaining handicapped person's certification. Contact your local Veteran's Affairs Office (Department of Military Affairs) for details on obtaining veteran's preference certification. For more information, contact your local Job Service. If you are claiming either employment preference, you must complete the Employment Preference insert.

1.	Name _____ <div style="text-align: center;"><i>Last                      First                      MI</i></div>
2.	Social Security Number _____
3.	Address _____ <div style="text-align: center;"><i>Street</i></div> _____ <div style="text-align: center;"><i>City                      State                      Zip Code</i></div>
4.	Phone No. (    )    (    ) <div style="text-align: center;"><i>Work                      Home</i></div>
5.	Do you have a valid Driver's License? <input type="checkbox"/> YES <input type="checkbox"/> NO

*My signature below certifies that all information on this and all attached pages is true, correct, and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. Falsifications or misrepresentations may disqualify me from considerations for employment, or if hired, may be grounds for termination at a later date. **EMPLOYERS MAY BE CONTACTED AS REFERENCES.***

SIGNATURE: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_



# LAKE COUNTY SHERIFF'S OFFICE

DONALD R. BELL

BEN WOODS

SHERIFF / CORONER

UNDERSHERIFF

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## 6. EDUCATION

- A. High School Name: \_\_\_\_\_ C. Address of High School Awarding  
B. Received: \_\_\_\_\_ Diploma or Equivalency Certificate: \_\_\_\_\_  
| | Diploma or Equivalency Certificate \_\_\_\_\_  
| | None - If "NONE", Highest Grade Completed \_\_\_\_\_

D. College or University	Dates	Credit Hours	Degrees	Date		
Location of School	Attended	Earned Sem. / Qtr.	Received (BA,MA,etc)	of Degree	Major Field	Minor Field
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

E. Other Schools or Training Which Helps You Qualify Name, Location	Dates Attended	Did You Complete?	Title/Description of Course	Total Hours
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## 7. PROFESSIONAL LICENSES, REGISTRATION, OR CERTIFICATES (EMT, GVW, Diver, POST, et c.)

Name and Complete Address of Licensing Agency	Type of License	Endorsement/Restriction (if Applicable)	Date Licensed
--	-----------------	--	------------------

\_\_\_\_\_  
\_\_\_\_\_

## 8. SPECIAL SKILLS – Check the skills you possess. Specify speed/errors where requested.

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Typing ____/____                   | <input type="checkbox"/> 10 Code                                  | <input type="checkbox"/> Medical Terminology |
| <input type="checkbox"/> Accident Investigation             | <input type="checkbox"/> Legal Terminology                        | <input type="checkbox"/> Photo Skills        |
| <input type="checkbox"/> Computer Software _____            | <input type="checkbox"/> Other (List in Section #11 of this form) |  |
| <input type="checkbox"/> Computer Languages (specify) _____ |   |  |

## 9. EQUIPMENT - List types of equipment you can operate and specify name or model you have used (Radio Equipment, Computer Equipment, Video Equipment, Alcohol Consumption Testing Equipment, etc.) Continue in Section #11 if more space is needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





# LAKE COUNTY SHERIFF'S OFFICE

DONALD R. BELL

BEN WOODS

SHERIFF / CORONER

UNDERSHERIFF

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

10. **EXPERIENCE:** Begin with your present or most recent job and list your work experience with emphasis on experience that is relevant to the position for which you are applying. Include military service and any volunteer work experience that would help you qualify. List each promotion as a separate position. You may respond to this section on a separate sheet of paper if all questions in the blocks are answered and the same format is followed. On each sheet write your name and job title for which you are applying. This information must be completed even if a resume is submitted.

Notice to applicants: Information that you provide on this application is subject to verification. Previous employers may be contacted as references. Do you want to be informed before we contact your present employer? ☐ YES ☐ NO

Address of Employer
------------------------

Type of Business \_\_\_\_\_

Dates Employed \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Average Hrs. Per Week \_\_\_\_\_

Your Job Title \_\_\_\_\_ ☐ Full-time ☐ Part-time ☐ Volunteer

Immediate Supervisor(s) \_\_\_\_\_ Phone Number \_\_\_\_\_

Describe your duties in detail (knowledge, skills, abilities required, employees supervised, accomplishments)


Reason for Leaving: \_\_\_\_\_

Address of Employer
------------------------

Type of Business \_\_\_\_\_

Dates Employed \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Average Hrs. Per Week \_\_\_\_\_

Your Job Title \_\_\_\_\_ ☐ Full-time ☐ Part-time ☐ Volunteer

Immediate Supervisor(s) \_\_\_\_\_ Phone Number \_\_\_\_\_

Describe your duties in detail (knowledge, skills, abilities required, employees supervised, accomplishments)


Reason for Leaving: \_\_\_\_\_



# LAKE COUNTY SHERIFF'S OFFICE

DONALD R. BELL  
SHERIFF / CORONER

BEN WOODS  
UNDERSHERIFF

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

## ADDITIONAL EMPLOYMENT EXPERIENCE

Address of Employer
------------------------

\_\_\_\_\_ Type of Business \_\_\_\_\_  
\_\_\_\_\_ Dates Employed \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
\_\_\_\_\_ Average Hrs. Per Week \_\_\_\_

Your Job Title \_\_\_\_\_ ☐ Full-time ☐ Part-time ☐ Volunteer

Immediate Supervisor(s) \_\_\_\_\_ Phone Number \_\_\_\_\_

Describe your duties in detail (knowledge, skills, abilities required, employees supervised, accomplishments)


Reason for Leaving: \_\_\_\_\_

Address of Employer
------------------------

\_\_\_\_\_ Type of Business \_\_\_\_\_  
\_\_\_\_\_ Dates Employed \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
\_\_\_\_\_ Average Hrs. Per Week \_\_\_\_

Your Job Title \_\_\_\_\_ ☐ Full-time ☐ Part-time ☐ Volunteer

Immediate Supervisor(s) \_\_\_\_\_ Phone Number \_\_\_\_\_

Describe your duties in detail (knowledge, skills, abilities required, employees supervised, accomplishments)


Reason for Leaving: \_\_\_\_\_

Address of Employer
------------------------

\_\_\_\_\_ Type of Business \_\_\_\_\_  
\_\_\_\_\_ Dates Employed \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
\_\_\_\_\_ Average Hrs. Per Week \_\_\_\_

Your Job Title \_\_\_\_\_ ☐ Full-time ☐ Part-time ☐ Volunteer

Immediate Supervisor(s) \_\_\_\_\_ Phone Number \_\_\_\_\_

Describe your duties in detail (knowledge, skills, abilities required, employees supervised, accomplishments)


Reason for Leaving: \_\_\_\_\_

12. LIST ANY CRIMINAL CONVICTIONS YOU HAVE HAD AS AN ADULT



# LAKE COUNTY SHERIFF'S OFFICE

DONALD R. BELL  
SHERIFF / CORONER

BEN WOODS  
UNDERSHERIFF

106 Fourth Avenue East, Polson, Montana 59860 Phone: 406-883-7301 Fax: 406-883-7305

PD-25A(12-93)

## EMPLOYMENT PREFERENCE FORM

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Position Applied For \_\_\_\_\_  
Job Title \_\_\_\_\_ Position No. \_\_\_\_\_ Department Name \_\_\_\_\_

To claim preference under the **Montana Veterans' Employment Preference Act** or the **Montana Handicapped Persons' Employment Preference Act**, complete the following. Providing the following information is voluntary but must be included with the application in order to claim employment preference. This information will be kept confidential and will only be used during the hiring process to provide the applicant employment preference. Applicants hired by the state will have this information placed in a separate confidential file.

1. Veterans' Employment Preference provides the addition of 5% points or 10% points to the applicant's score when a numerically scored selection procedure is used. To claim **Veterans' Employment Preference** you must be a U. S. Citizen and (check one of the boxes below):

- ☐ **A Veteran, if**
1. You have been separated under honorable conditions, AND
  2. you have served more than 180 consecutive days of active duty other than for training in the Army, Air Force, Navy, Marines, or Coast Guard (not including National Guard or Reserves) or a member of the reserves who served on active duty during a period of war or in a campaign or expedition for which a campaign badge is authorized.
- ☐ **A Disabled Veteran, if**
1. you have been separated under honorable conditions from active duty, AND
  2. you have an established Armed Forces, service-connected disability OR are receiving compensation, disability retirement benefits, or pension from the U.S. Department of Veterans Affairs or military department, OR you have received a Purple Heart.
- ☐ **The spouse of a disabled veteran if the veteran's disability prevents him/her from working.**
- ☐ **The unremarried surviving spouse of a veteran or disabled veteran.**
- ☐ **The mother of a veteran, if**
1. THE VETERAN died under honorable conditions while serving in the Armed Forces, OR THE VETERAN has a service-connected, permanent, and total disability, AND
  2. YOUR SPOUSE is totally and permanently disabled, OR YOU are the unremarried widow of the father of the veteran.

2. To claim **Montana Handicapped Persons' Employment Preference** you must be (check one of the boxes below):

- ☐ **A person with a disability certified by SRS, OR**
- ☐ **The spouse of a totally (100%) disabled person certified by SRS, AND**  
Resided continuously in Montana for at least 1 year immediately before applying for employment.

3. In the box below, check the attachment you have included to document the preference request.

☐ DD-214      ☐ SRS Certification      ☐ Other \_\_\_\_\_  
(Specify)

SIGNATURE \_\_\_\_\_

DATE SIGNED \_\_\_\_\_